U.S. Department of Labor Employment Standards Administration Office of Labor-Management Standards Washington, DC 20210

FORM LM-4 LABOR ORGANIZATION ANNUAL REPORT Office of Management and Budget No. 1215-0188

Expires: 11-30-2002

FOR USE ONLY BY LABOR ORGANIZATIONS WITH LESS THAN \$10,000 INTOTAL ANNUAL RECEIPTS

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalities as provided by 29 U.S.C. 439 or 440.	
READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.	
For Official Use Only 1. FILE NUMBER 2. PERIOD	O COVERED 3. (a) AMENDED — If this is an amended report correcting a previously filed report, check here:
(S) Recd 9	O / O / O O O (b) TERMINAL — If your organization ceased to exist and this is its terminal report, see Section X of the instructions and check here:
	1231,2000
	8. MAILING ADDRESS (Type or print in capital letters.)
	First Name
IMPORTANT	*** * *** ** ** ** ** *** ***
CHARLENE HARTZELL (4) 020-022	·
HOTEL EMPL, RESTAURANT EMPL AFL-CIO 420	Last Name
LU 441	:
404 S MARYLAND	P.O. Box • Building and Room Number (if any)
AMARILLO, TX 79106 12/2000	P.O. DOX * Building and moon reuniber (if any)
	·
11:::14:1::::1111:::11::11::11	Number and Street
	<u> </u>
AFFILIATION OR ORGANIZATION NAME	City
DESIGNATION (Local, Lodge, etc.) 6. DESIGNATION NUMBER	Arrangement commence of the co
	State ZIP Code + 4
7. UNIT NAME (if any)	
9. ADDITIONAL INFORMATION (If more space is needed, attach additional pages properly identified.)	
Item Number	
10 DUES INCREASED FROM 30. A MONTH to \$21.30 A month on JAN 1, 2000	
10 DUES INCREASED FROM 20. A MONTH TO SELECT APPOINT ON SANT, 2000	
Each of the undersigned, duly authorized officers of the above labor organization, declares, under the applicable penalties of law, that all of the information submitted in this report (including the information contained	
n any accompanying documents) has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See Section VI on penalties in the instructions.)	
20. SIGNED: Erma Mitchell PRESIDENT 21. SIGNED: (hiller Hartsul) TREASURER	
(If other title,	
3 129 1 2061 (806) 383 - 0113 see instructions.) 3 129 1201 (806) 373 - 4740 see instructions.)	
Date Telephone Number	Date Telephone Number

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8865

\$ 7784

\$ 1950

Complete Items 9 through 18.

- - If "Yes," enter the maximum amount recoverable under the bond for loss caused by any person.
- 13. How many members did your organization have at the end of the reporting period?
- 35

\$500000

- 14. Enter the total value of your organization's assets at the end of the reporting period (cash, bank accounts, equipment, etc.).
- 15. Enter the total liabilities (debts) of your organization at the end of the reporting period (unpaid bills, loans owed, etc.).
- 16. Enter the total receipts of your organization during the reporting period (dues, fees, interest received, etc.). (If \$10,000 or more, your organization must file Form LM-2 or LM-3 instead of this form.)
- 17. Enter the total disbursements made by your organization during the reporting period (per capita tax, loans made, net payments to officers, payments for office supplies, etc.). \$ 7 9
- 18. Enter the total payments to officers and employees during the reporting period (gross salaries, lost time payments, allowances, expenses, etc.).

Please be sure to:

- Enter your union's 6-digit file number in Item 1.
- Report a time period of no more than one year in Item 2.
- Have your union's president and treasurer sign the Form LM-4 in Items 20 and 21.
- FILE ON TIME. Form LM-4 must be filed within 90 days after the end of your union's fiscal year.

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